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STUDIES

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THE HEALTH OF MINORITIES IN NORTH CAROLINA

by

Delton Atkinson

ABSTRACT

Using an array of health indicators on pregnancy, mortality and morbidity, this study depicts the health status and health habits of minorities in North Carolina relative to whites over the past 10 years. Compared to a decade ago, minorities are living longer and are healthier. Rates of infant and fetal death, pregnancy (including teenage pregnancy), inadequate prenatal care, and general mortality have declined substantially. But relative to whites, minorities continue to suffer illness and death disproportionately and this disproportionate suffering has not been appreciably altered in the past decade. This suffering is an even greater problem among younger than older minorities. The major contributors to the disproportionality are unintended pregnancies, infant deaths, hypertension, diabetes, homicides, cancer (particularly prostate, stomach, cervical, and lung cancers), accidents except motor vehicle, cerebrovascular disease, nephritis/nephrosis, and chronic liver disease/cirrhosis. The causes of the health differentials appear to be multifactorial and are embedded in a complex interaction of socioeconomic, health and other factors that is poorly understood for the general population and even less so for minorities. Minimizing the longstanding disparities will require creative thinking by the public health community.